					l De	cket No.	
AMENDMENT TRANSMITTAL LETTER						TRB-10302/38	
Application No. 10/599,016-Conf. #3156		Filing Date September 18, 2006		Examiner B, S, Szma		Art Unit 3736	
			10,2000	D. O. OZING	<u>'</u>	3730	
Applicant(s): Landon C, G, Miller							
Invention: SYSTEM AND METHOD FOR NEUROLOGICAL INJURY DETECTION, CLASSIFICATION AND SUBSEQUENT INJURY AMELIORATION							
TO THE COMMISSIONER FOR PATENTS							
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	Claims Highest Remaining Number Number		JEU				
	After Amendment	Previously Paid	Extra Claims Present	Rate			
Total Claims	13	- 20 =	0	x 25.00		0.00	
Independent Claims	2	- 3 =	0	x 105.00		0.00	
Multiple Dependent Claims (check if applicable)							
Other fee (please specify):							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00							
Large Entity x Small Entity							
x No additional fee is required for this amendment. Please charge Deposit Account No. in the amount of \$							
A duplicate copy of this sheet is enclosed.							
A check in the amount of \$ to cover the filing fee is enclosed.							
Payment by credit card. Form PTO-2038 is attached.							
x The Director is hereby authorized to charge and credit Deposit Account No							
x Credit any overpayment.							
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
/Avery N. Goldstein, Ph.D./ Avery N. Goldstein, Ph.D. Avery N. Goldstein, Ph.D.							
Attorney/Agent		204					
GIFFORD, KRASS, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 Troy Center Drive, Sulte 330 Post Office Box 7021 Troy, Mitchigan 48007-7021 (248) 847-8000							